

Sector *AS*Please type a plus sign (+) inside this box → ☐PTO/SB.21 (6-98)  
Approved for use through 09/30/2000, OMB 0651-0031  
Patent and Trademark office: U.S. DEPARTMENT OF COMMERCE

+

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL  
FORM**

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

12

Application Number 09/492,246

Filing Date January 27, 2000

First Named Inventor Tonkovich

Group Art Unit not yet assigned

Examiner Name not yet assigned

Attorney Docket Number E-1666B CIP

**ENCLOSURES (check all that apply)**☒ Fee Transmittal Form☐ Fee Attached☐ Amendment/ Response☐ After Final☐ Affidavits/ declaration (s)☐ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Responses to Missing Parts/  
Incomplete Application☒ Response to MissingParts under 37 CFR  
1.52 or 1.53☒ Assignment Papers

(for an application)

☐ Drawing (s)☐ Licensing-related Papers☐ Petition Routing Slip (PTO/SB/69)  
and Accompanying Petition☐ Petition to Convert to a  
Provisional Application☐ Power of Attorney, Revocation  
Change of Correspondence  
Address☐ Terminal Disclaimer☐ Small Entry Statement☐ Request for Refund☐ After Allowance Communication  
to Group☐ Appeal Communication to Board  
of Appeals and Interference(s)☐ Appeal Communication to Group  
(Appeal Notice, Brief, Reply Brief)☐ Proprietary information☐ Status Letter☒ Additional Enclosure(s)  
(please identify below):*Declaration*

Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**Firm  
or  
Individual name

Stephen R. May

Signature

*Stephen R. May*

Date

*June 20, 2000***CERTIFICATE OF MAILING**I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant commissioner for Patents, Washington, D.C. 20231 on this date: 

Type or printed name

Janice Laybourn

Signature

*Janice Laybourn*

Date

*6/20/2000*

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

+

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**FEE TRANSMITTAL**  
**For FY 2000**

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 AND 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 120.00)

**Complete If Known**

Application Number	09/492,246
Filing Date	1/27/2000
First Named Inventor	Tonkovich, et al.
Examiner Name	Not Yet Assigned
Group/Art Unit	Not Yet Assigned
Attorney Docket No.	E-1666B CIP

**METHOD OF PAYMENT (check one)**
☒ The Commissioner is hereby authorized to charge  
indicated fees and credit any overpayments to:

 Deposit Account Number **02-1275**  
 Deposit Account Name **Battelle Memorial Institute - PND**
☒ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17
**2. Payment Enclosed:**
☐ check ☐ Money Order ☐ Other
**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity (\$)	Small Fee Code	Entity (\$)	Fee Description	Fee Paid
101	690	201	345	Utility filing fee	
106	310	206	155	Designing filing fee	
107	480	207	240	Plant filing fee	
108	690	208	345	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$ -0-

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee form below	Fee Paid
20 **	0 X	0	0
Independent Claims	3 *	0 X	0
Multiple Dependent			

\*\*or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity (\$)	Small Fee Code	Entity (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	260	204	130	Multiple dependent claim, if not paid

109 78 209 39 \*\*Reissue independent claims over original patent

110 18 210 9 \*\*Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ -0-

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge- late filing fee or oath	65
127	50	227	25	Surcharge- late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	55
116	380	216	190	Extension for reply within second month	
117	870	217	435	Extension for reply within third month	
118	1,360	218	680	Extension for reply within forth month	
128	1,850	228	925	Extension for reply within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Requesting for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,210	241	605	Petition to revive - unintentional	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	224	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	690	246	345	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	690	249	345	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)					
Other fee (specify)					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$ 120.00					

**SUBMITTED BY**

Name (Print/Type)

Stephen R. May

Registration No.

(Attorney/Agent)

29,255

Telephone

Complete (if applicable)

(509) 375-2387

Signature

*Stephen R. May*

Date

June 20, 2000

SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.